

Open Enrollment 2018: New Hire



Bi-Weekly Rates	County's Premium for employee only	Emplo	oyee	Employee 8	& Child(ren)	Employee	& Spouse	Employee	& Family
Non Wellness									
HSA	\$317.54	\$61.23	\$72.36	\$120.36	\$142.24	\$148.98	\$176.06	\$223.37	\$263.98

and the Disc	f 2040					
Medical Plan for 2018						
High Deductible Health Plan with an Health Savings Account (HSA)						
Deductible (Single/Family) In-Network						
Deductible (Single/Family)	\$1,600/\$3,200					
Out-of-Network Deductible (Single/Family)	\$3,200/\$6,400					
HSA Seed (Single/Family)	\$750/\$1,500					
Coinsurance						
In-Network	20%					
Out-of-Network	40%					
In-Network OOP Max (includes deductible)	\$3,550/\$7,100					
Out-of-Network	\$7,100/\$14,200					
Lifetime Maximum Benefit	Unlimited					
Physician Services						
Office Visits (PCP/Specialist)	20% after ded.					
Preventative Care	Covered at 100%					
Allergy Injection	200/ - ft - n d - d					
(by non-physician)	20% after ded.					
Surgery	20% after ded.					
Hospital/Facility						
Inpatient/Out Patient Hospital	20% after ded.					
Emergency Room	20% after ded.					
Urgent Care	20% after ded.					
Prescription Drugs (Retail)						
Generic Preventive (see list on pg. 19)	100%					
Retail Generic	20% after ded.					
Retail Preferred Brand	20% after ded.					
Retail Non-Preferred Brand	20% after ded.					
Vision Care						
Routine Eye exam	20% after ded.					

Telehealth

Now Cigna provides access to **two** telehealth services as part of your medical plan – **AmWell** and **MDLIVE**. Televisits with AmWell and MDLIVE can be a cost-effective alterna-



tive to a convenience care clinic or urgent care center, and cost less than going to the emergency room. And the cost of a phone or online visit is the same or less than with your primary care provider.

Register for one or both today so you'll be ready to use a telehealth service when and where you need it.

AmWellforCigna.com 855-667-9722

MDLIVEforCigna.com 888-726-3171

Medical Plan Opt Out/Waive Mecklenburg County Employees Only

If you have other group coverage and do not want to participate in the County's medical plan for 2018, you may choose to opt out/waive and receive a one time cash award of \$400 (grossed up to \$540) added to your paycheck. The opt out/waive status will remain in effect the entire year unless you have a qualifying family status change. Employees hired during the year receive a prorated cash award. Mecklenburg County reserves the right to request proof of coverage of other medical coverage at any time.

myTotalHealth Reward



The myTotalHealth Wellness program is here to help you reach and maintain optimal health. The rewards program offers a wellness premium incentive

Save \$600 annually by completing the following wellness activities:

Biometric Screening: DUE BY SEPTEMBER 14, 2018

You can obtain a biometric screening by going to one of the following:

- 1. Primary Physician
- 2. Minute Clinic
- 3. Onsite Biometric Screenings: Mecklenburg County will provide limited onsite biometric screenings. Dates and locations are TBD.

Health Risk Assessment: DUE BY SEPTEMBER 14, 2018

Login into myCigna.com and complete the Health Risk Assessment. Don't have an account? Visit MeckWeb to find instructions for completing the Health Risk Assessment.

Health Coaching: Telephonic health coaching is optional and not required to receive the myTotalHealth Reward.

Why is Cigna calling me? Mecklenburg County offers Cigna programs to help you get healthy and live well. Cigna is excited to get to know you, so they call you at home to talk about ways to work together to help you manage your health.

Cigna offers several health and wellness programs that are free to employees who are enrolled in Cigna insurance through the County.

Healthy Pregnancy/ Healthy Babies Program

This program provides additional support from Cigna staff to expecting mothers throughout the course of their pregnancy. For more information or to enroll call Cigna 1.800.615.2906

Lifestyle Management Program

Whether you're looking for help with weight, tobacco or stress management, our Lifestyle Management Programs are here for you. Each program is easy to use, available where and when you need it, and is always no cost to you. Call 1.866.417.7848 or visit myCigna.com

myCigna

TeleHealth

Now Cigna provides access to telehealth services as part of your medical plan – AmWell and MDLIVE.

Cigna Telehealth Connection lets you get the care you need, including most prescriptions, for a wide range of minor conditions. Now you can connect with a doctor via secure video chat or phone, without leaving your home or office.

AmWellforCigna.com 855-667-9722

MDLIVEforCigna.com 888-726-3171

Mail Order Prescriptions

- Delivered to your home
- 90 day supply with refills

Save time and money by simply calling Cigna to make arrangements to transfer your existing prescription to Cigna's mail Order Program. It's that simple! Call Cigna at 1.800.285.4812 or enroll online myCigna.com

Why is Cigna calling me? Mecklenburg County offers Cigna programs to help you get healthy and live well. Cigna is excited to get to know you, so they call you at home to talk about ways to work together to help you manage your health.

Bi-Weekly County's		Empl	oyee	Employee & Child(ren)		Employee & Spouse		Employee & Family	
Rates Premium	12 Month	10 Month	12 Month	10 Month	12 Month	10 Month	12 Month	10 Month	
Standard	\$8.88	\$2.21	\$2.61	\$14.26	\$16.85	\$11.59	\$13.70	\$22.80	\$26.95
Enhanced	\$14.60	\$3.62	\$4.28	\$23.42	\$27.68	\$19.04	\$22.50	\$37.45	\$44.26

Dental Plan Choices for 2018				
	Standard Plan	Enhanced Plan		
Calendar Year Maximum (Class I, II, and III Expenses)				
(per individual)				
In-Network	\$1,000	\$1,500		
Out-of-Network	\$1,000	\$1,500		
Calendar Year Deductibles (Individual/Family)				
In-Network	\$75/\$225	\$50/\$150		
Class I Expenses - Preventive & Diagnostic Care	100% /80%	100% /100%		
(In-Network/Out-of-Network)	No Deductibles	No Deductibles		
Oral Exams				
Cleanings				
Routine X-Rays				
Fluoride Application	1			
•	1			
Sealants	-			
Space Maintainers (limited to non-orthodonic treat-				
ment)	_			
Non-Routine X-Rays	-			
Emergency Care to Relieve Pain	_			
Histopathologic Exams				
Class II Expenses - Basic Restorative Care	70% /50%	80% /80%		
(In-Network/Out-of-Network)	After Deductible	After Deductible		
Fillings	_			
Oral Surgery - Simple Extractions	_			
Oral Surgery - All Except Simple Extractions	_			
Surgical Extraction of Impacted Teeth				
Anesthetics				
Major Periodontics				
Minor Periodontic				
Root Canal Therapy/Endodontics				
Relines, Rebases, and Adjustments				
Repairs - Bridges, Crowns, and Inlays				
Repairs - Dentures				
Class III Expenses - Major Restorative Care	40% / Not Covered	50% / 50%		
(In-Network/Out-of-Network)	After Deductible	After Deductible		
Crowns/Inlays/Onlays				
Dentures				
Bridges				
Class IV Expenses - Orthodontia				
(In-Network/Out-of Network)				
Coverage for Eligibile Children Only (up to age 19)	Not Covered	50% / 50%		
		No Separate Deductible		
Lifetime Maximum	Not Covered	\$1,500		
	Teeth missing prior to o	coverage under the CIGNA		
Missing Tooth Provision	Dental plan are not covered.			
	Available on a voluntary basis when extensive			
Treatment Review	work in excess of \$200 is proposed.			
Student Age		26		



Regular fulltime employees will have two options in selecting a dental plan: the Standard or Enhanced plan. Below are just a few of the differences between the two plans:

Standard

Must go to a Network dentist Calendar Year Maximum of \$1,000 per individual No Orthodontic coverage

Enhanced

May go to any dentist
Calendar Year maximum of
\$1,500 per individual
Orthodontic Coverage (Life
time Max \$1,500 per
individual)

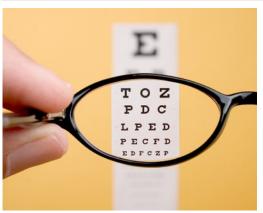
NOTE: Dental cards will NOT be issued to employees. To print a dental card or to locate a provider, please go to www.cigna.com.



Bi-Weekly Rates	Empl	oyee	•	yee & I(ren)	Employee & Spouse		Employee & Family	
	12 Month	10 Month	12 Month	10 Month	12 Month	10 Month	12 Month	10 Month
Standard	\$2.23	\$2.63	\$4.86	\$5.74	\$4.62	\$5.46	\$7.64	\$9.03
Enhanced	\$4.54	\$5.36	\$8.73	\$10.31	\$8.51	\$10.06	\$13.27	\$15.69

The County offers regular fulltime employees a choice of two voluntary vision plans for a minimal premium which provides coverage for exams, lenses, frames, contacts, etc. at reduced costs.

Non-Covered Contact Lenses



Note: Vision cards will NOT be issued to employees as part of this plan.

Vision Plan Choices for 2018					
	Standard Plan	Enhanced Plan			
Copays	eye exam every 12 months				
Comprehensive Exam	\$10	\$0			
Materials	\$20	\$0			
Contact Lenses in lieu of eyeglasses	Contact Lenses ev	ery 12 months			
Covered-in-full Contact Lenses	Contacts (including disposables), the fitting/evaluation fees, and up to two follow-up visits are covered-in-full. If covered disposable contact lenses are chosen, up to 6 boxes are included when obtained from a network provider.				

A \$150.00 allowance is applied toward the fitting/

materials copay does not apply

evaluation fees and purchase of contact lenses outside of

UnitedHealthcare Vision covered-in-full contacts. The

Laser Vision Benefit

UnitedHealthCare Vision has partnered with the Laser Vision Network of America to provide our members with access to discounted laser vision correction providers. 1-888-563-4497

Out of Network Reimbursement

Standard and Enhanced Plan benefits are the same. Network copays do not apply

Up to

Comprehensive Exam	\$40
Lenses	
Single Vision	\$40
Bifocal	\$60
Trifocal	\$80
Lenticular	\$80
Frames	\$45
Contact Lenses (in lieu	of eyeglasses)

You do not need to submit a claim for In-Network benefits. However, you must submit a claim to United HealthCare Vision for benefit

reimbursement for Out of Network services.

\$150 \$210

Frames	\$50 wholesale frame all sale cost of a frame at p	Frames every 24 months \$50 wholesale frame allowance applied toward the wholesale cost of a frame at private practice providers, or		
	a frame at retail chain p	applied toward the retail price of roviders.		
Lenses and Lens Options	, ,	d Lens Options are Covered-in-Full ery 12 months		
	Standard Plan	Enhanced Plan		
	Lined bifocal	Standard Plan Plus:		
	Single Vision	High-End Progressives		
	Round & seg.	Basic Progressives		
	Lined trifocal	Super ET		
	Scratch Coating	Gradient Tint		
	Plastic bifocals	Photochromatic		
	Plastic trifocals	Polycarbonate		
		Uv & scratch guard		
		Solid Tint		
		Transition		
		UV Coating (Glass)		
		UV Coating (Plastic)		
		Platinum progressive		
		Premium progressive		

Elective

*Necessary

Health Savings Accounts



What is a Health Savings Account (HSA)?

A Health Savings Account (HSA) is an account that you can put money into to save for future medical expenses. HSAs allow you to pay for eligible medical expenses on a pre-tax basis. You can make contributions with pre-tax (via payroll deduction) or post-tax dollars.

Who is eligible for an HSA?

- If you are in a Consumer Driven Health Plan (County's HSA Medical Plan)
- If you are not covered by any other health plan including Medicare, TRICARE, or TRICARE for Life
- If you have not received VA benefits within the past 3 months
- If you are not claimed as a dependent on someone else's tax return
- If you are not covered by a Health Care Spending Account (FSA)

How do I use my HSA?

Use your debit card, checkbook, auto pay, or online bill pay for any out of pocket health care expenses.



What are the benefits of an HSA?

- Account ownership—You own your account. You can use it, invest it, save it and move it as you see fit.
- Portability—Accounts are completely portable, meaning you can keep your HSA even if you:
 - Change jobs or retire
 - Change medical coverage
 - Become unemployed
 - Move to another state
 - Change your marital status
- Money can be used to pay for out of pocket IRSqualified medical expenses. For a list of qualified expenses, please refer to Section 213(d) of the Internal Revenue code or visit Cigna.com.
- There are no "use it or lose it" rules for HSAs.

2018 Contribution Limits

- Individual \$3,450
- Family \$6,900

Individuals age 55 and older can contribute an additional \$1,000 per year "catch-up" contribution.



When you have questions, we've got answers!

Cigna offers you live customer service 24 hours a day, seven days a week, 365 days a year – that includes weekends and holidays. Call 1-800-244-6224.

Flexible Spending Accounts

What is a Flexible Spending Account (FSA)?

FSA is a pre-tax program to help reduce health care and dependent care out-of-pocket expenses.

Health Care Spending Account is for regular fulltime employees and eligible dependent healthcare expenses not covered by insurance like co-pays, deductibles, prescriptions, dental or vision care. You may contribute a minimum of \$260.00 up to a maximum of \$2600.00 per year.

Note: Employees enrolled in the County's HSA plan cannot enroll in the health care spending account.

- Dependent Care Account is for regular fulltime employees for dependent care expenses for a child under the age of 13 or a disabled spouse or dependent. If you are married, you can use this account if you and your spouse both work, are looking for work, or, in some situations, if your spouse is a full-time student. You may contribute a minimum of \$260.00 to a maximum of \$5000.00 per year.
- Commuter Reimbursement Account (CRA) is for regular full-time employees for transit (bus, rail, vanpool) expenses. You can use this account to purchase CATS bus, rail or vanpool passes. You may contribute up to \$255/ month and you may withdraw up to \$255/month. Remaining balance will roll over from month to month. Deductions may be started and stopped at any time.

Visit www.myameriflex.com for a complete list of eligible expenses.

How do I contribute to my FSA?

Once you make your annual election, the amount will be deducted from your pay in equal amounts throughout the year, before taxes are deducted.



How do I get reimbursed?

A Flex Debit Card will be is-

sued to you and you may use your card to be reimbursed for eligible expenses and the funds will be automatically deducted from your Spending Account. OR simply pay for the eligible expenses and then fax or mail a timely reimbursement request and receipt to be processed. Forms are available on MeckWeb intranet site.



*Annual Savings Example:	With FSA Account	Without Account
Annual Salary	35,000	35,000
Pre-tax Contribution	1,500	
Taxable income	33,500	35,000
Federal and State Taxes	(7,107)	(7,597)
After-Tax dollars spent on eligible expenses	0	1,500
Spendable income	26,393	25,903
Tax Savings with an FSA	490	

*Sample tax savings for a single taxpayer with no dependents. Actual savings will vary based on your individual tax situation. Please consult a tax professional for more information.

Important Note:

You may claim expenses incurred from January 1, 2018 through March 15, 2019. Unused

How do I contact AmeriFlex?

Mailing Address:

AmeriFlex

700 East Gate Drivek, Suite 510 Mount Laurel, New Jersey 08054

phone: 1-888-868-3539 fax: 1-888-631-1038

or visit them on the web at:

www.myameriflex.com

Savings and Retirement

NC Retirement System

Mecklenburg County regular full-time and part-time employees are automatically enrolled into the North Carolina Local Government Retirement System upon employment. Employees contribute 6% of gross wage and are vested after 5 years of service.



529 COLLEGE SAVINGS PLAN

North Carolina 529 College Savings Plan

Employees can save for college through payroll deduction with the NC 529 College Savings Plan. The plan offers a wide range of investment options from conservative to aggressive. Investments can be used to any college for qualified educational expenses such as tuition, books, and room and board.

To enroll in the plan, contact the College Foundation of North Carolina (CFNC) toll free at 800-600-3453 or visit www.NC529.org. Once you have enrolled and selected the payroll deduction option a representative from CFNC will contact the County to advise that you've requested that your contributions be payroll deducted.

401(K) AND 457 MATCHING PLANS

Mecklenburg County offers a match to regular full-time and parttime non-sworn employees who participate in the 401(k) and/or 457 supplemental retirement plans. The match is currently:

- Dollar for Dollar Match up to 5%
- 100% Vested Immediately
- No Waiting Period for Participation



Employees are able to choose to contribute either pre-tax or after -tax Roth. The County Match is always contributed on a pre-tax basis. The 5% matching funds from the County apply to employee contributions in any one or a combination of plans for a total of 5%.

The NC 401(k) plan is administered by Prudential Retirement.

The Choice of 457 plans offered through the County

- IMCA-Retirement Corporation 457 plan.
- NC 457 plan administered by Prudential Retirement.

All sworn LEO's will automatically receive the State mandated 5% employer contribution to the NC 401(k).

Changes can be made to your plans at any time, so start small and increase when you can. Enrolling is fast and easy and the plans work hard to make the investing simple. Local, personal help is available to all County employees.







457 Plan ICMA-RC Client Services: 800.669.7400

> Daisy Jones djones@icmarc.org 866.266.7310

www.icmarc.org/selfenroll Plan Number: 300354

NC 401(k) Plan and NC 457 Plan Client Services: 866-627-5267

Jodie Musselwhite
Jodie.musselwhite@prudential.com

www.ncplans.prudential.com

NC Retirement System 877-627-3287

www.myNCretirement.com

Life and Disability Benefits

Basic Term Life Insurance

Regular fulltime employees are automatically covered with basic term life insurance in the amount equal to their annual salary. Dependent/Spouse coverage of \$10,000 is available.

Supplemental Term Life Insurance

The County offers fulltime employees the opportunity to purchase up to six (6) times their annual salary (or up to \$1,000,000) in supplemental term life insurance. Proof of good health is not required if requested coverage does not exceed four (4) times the annual salary or \$300,000 and if enrollment begins immediately upon eligibility. The policy includes an accelerated death benefit for those with terminal illnesses as well 20% of coverage. Restrictions apply. as Accidental Death and Dismemberment (AD&D) benefits. Rates are based on age, smoking habits, and amount of insurance requested.

Short Term Disability

This benefit is provided to assist a fulltime employee who is disabled due to a non-work related illness or accident. Sixty percent of the employee's weekly earnings will be paid for up to 26 weeks, after a 25-day waiting period. Short Term Disability begins 90 days after employment and excludes pre-existing conditions.

Long Term Disability

Long Term disability replaces 40% of a fulltime employee's salary for up to 5 years should he or she become disabled. This benefit is provided by the County for regular employees who have less than 5 years of service with the County. Employees with 5 or more years will refer to the NC Retirement System plan for benefits. Employees can also purchase an additional



Voluntary Critical Care Benefit

What is Group Critical Care and how does it work?

Group Critical Care is designed to provide employees with additional financial protection to help them with the medical and non-medical costs of a specified disease. The plan pays a lump sum benefit after a covered illness or cancer is diagnosed. You can also choose to add an optional cancer benefit that pays a monthly benefit for extended treatment of cancer (internal or invasive cancer or carcinoma in situ).

It's innovative

It's there when you need it. Not only will it pay multiple times for multiple conditions, it offers an additional benefit for extended treatment and care of cancer.

It's not complicated

The plan pays lump sum benefits upon diagnosis of a covered critical illness or cancer (internal, invasive or carcinoma in situ).

It's flexible

You choose the face amount.

It's accessible

Guarantee Issue coverage is available.

It's compliant

This plan can be used along with your Health Savings Accounts.

Critical Illnesses Paid at 100%

- Heart Attack (Myocardial Infarction)
- Stroke
- Major Organ Failure
- End Stage Renal (Kidney) Failure
- Permanent Paralysis due to covered Accident
- Coma
- Blindness
- Occupational Infectious HIV or Occupational Infectious Hepatitis B, C, or D

Enhanced Wellness Benefit:

<u>\$100</u> payable once per plan year per covered person for screening tests such as:

- Mammography
- Pap smear
- PSA (blood test for prostate cancer)
- Serum cholesterol test for HDL & LDL
- Stress test on a bicycle or treadmill

Frequently Asked Questions

How are my benefits paid?

Benefits are paid directly to you, unless you specify otherwise. Benefits are paid regardless of any other coverage you may have with other insurance companies.

What if I change employers?

Benefits are portable. If you change jobs or retire, you can take your coverage with you at no increase in premium.

How do I file a claim?

Wellness claims may be filed over the phone. Simply call our Policyholder Service Center at 1.800.325.4368. For all other types of claims, visit coloniallife.com for additional information.



Regular fulltime employees interested in obtaining more information or enrolling in this Group Critical Care plan should call the Employee Services Center at (704) 432-6947.

Voluntary Accident Benefit

Accidents happen in places where you and your family spend the most time; at work, in the home and on the playground and they're unexpected. How you care for them shouldn't be.

In your lifetime, which of these accidental injuries have happened to you or someone you know?

- Sports-related accidental injury
- Broken bone
- Burn
- Concussion
- Laceration
- Back or knee injuries

- Car Accidents
- Falls & spills
- Dislocation
- Accidental injuries that send you to the Emergency Room, Urgent Care or doctor's office

Colonial Life's Accident Insurance is designed to help you fill some of the gaps caused by increasing deductibles, co-payments and out-of-pocket costs related to an accidental injury. The benefit to you is that you may not need to use your savings or secure a loan to pay expenses. Plus you'll feel better knowing you can have greater financial security.

What additional features are included?

- Worldwide coverage
- Portable

Will my accident claim payment be reduced if I have other insurance?

You're paid regardless of any other insurance you may have with other insurance companies, and the benefits are paid directly to you (unless you specify otherwise).

What if I change employers?

If you change jobs or leave your employer, you can take your coverage with you at no additional cost. Your coverage is guaranteed renewable as long as you pay your premium when they are due or within the grace period.

Can my premium change?

Colonial Life can change your premium only if we change it on all policies of this kind in the state where your policy was issued.

How do I file a claim?

Visit coloniallife.com or call our Customer Service
Department at 1.800.325.4368 for additional information.

Regular fulltime employees interested in obtaining more information or enrolling in this Voluntary Accident plan should call the Employee Services Center at (704) 432-6947.

Voluntary Cancer Benefit

The risk of developing cancer, unfortunately, is very real. In the United States, according to the American Cancer Society, 1 in 2 men and 1 in 3 women have a lifetime risk of developing cancer. 62% of the costs associated with cancer treatment are now considered out-of-pocket expenses not covered by your major medical insurance.

If you are diagnosed with cancer, how will you pay for what your health insurance won't?

Direct Costs Most Major Medical Plans Cover:

- Hospital charges
- Surgeon fees
- Physician Fees
- Medication & drug costs
- Radiological fees
- Nursing costs

Only 38% of cost covered

Indirect Costs You Pay:

- · Loss of wages or salary
- Deductibles or coinsurance
- Travel expenses to/from treatment centers
- · Lodging and meals
- Child care

You cover 62% of costs

What does the Cancer Plan cover?

The Cancer Plan pays for a variety of inpatient or outpatient benefits related to cancer treatment including, but not limited to:

- Hospital confinement
- Ambulance
- Air ambulance
- Private, full-time nursing services

Other inpatient and outpatient treatment benefits include a variety of other items such as those listed below:

- Radiation/chemotherapy
- Anti-nausea medication
- Experimental treatments
- Blood / Plasma / Platelets / Immunoglobulin
- Hair prosthesis / External breast / Voice box prosthesis
- Medical imaging studies
- Peripheral stem cell transplant
- Supportive / Protective care drugs and colony simulating factors
- Bone marrow stem cell transplant.

The Cancer Plan covers items you may not typically think of.

Oftentimes, there are costs associated with cancer treatment that you may not typically consider. Those costs listed below are covered under the Cancer Plan.

- Travel expenses
- Companion transportation and lodging
- Surgical procedures including skin cancer
- Second medical opinions
- Anesthesia
- Prosthetic or artificial limbs
- Outpatient surgical center
- Reconstructive surgery

With the Cancer Plan, premiums are TAX-FREE so you will receive an average savings of 30%.

Wellness Benefit:

Under the cancer plan, each covered individual can receive reimbursement for up to \$100.00 once per calendar year for a cancer or wellness screening.

The screenings include, but are not limited to:

- Chest x-ray
- Pap smear
- Mammography
- Breast ultrasound
- PSA blood test for prostate cancer
- Biopsy of skin lesion
- Colonoscopy

What else does the cancer benefit include?

The cancer plan also offers extended care benefits such as coverage for:

- Skilled nursing care facility
- Family care
- Hospice
- · Home health care service
- Waiver of Premium



Regular fulltime employees interested in obtaining more information or enrolling in this Voluntary Cancer plan should call the Employee Services Center at (704) 432-6947.

Voluntary Medical Bridge Benefit

How will you cover all of your medical expenses?

Medical Bridge, is designed to fill the gaps in your health insurance and help protect against those out-of-pocket expenses, including deductibles and co-pays, that occur when it comes to you or your family members' healthcare. This plan is a Health Savings Account (HSA) - compliant plan. This plan may also be offered to employees who do not have an HSA.

What is Medical Bridge and how does it work?

The Medical Bridge Plan helps to "bridge the gaps" in your health insurance.

Some of the Benefits Include:

- Hospital Confinement
- Observation Room
- Rehabilitation Unit Confinement
- Waiver of Premium
- Health Screening

Medical Treatment Package Includes:

- Air Ambulance
- Ambulance
- Appliance
- Doctor's Office Visit
- Emergency Room Visit
- X-Ray

Optional Riders Include:

- Daily Hospital Confinement
- Enhanced Intensive Care Unit Confinement

Enhanced Wellness Benefit:

This benefit helps reimburse you for part of the expense of tests you normally have each year. The Medical Bridge Plan pays **\$100** once per plan year per covered person for 24 health screening test such as:

- Blood test for triglycerides
- Breast ultrasound
- CA 15-3 (blood test for breast cancer)
- CA 125 (blood test for ovarian cancer)
- CEA (blood test for colon cancer)
- Chest x-ray
- Colonoscopy or virtual colonoscopy
- Fasting blood glucose
- Flexible sigmoidoscopy
- Hemoccult stool analysis

- Mammography
- Pap smear of thin prep pap
- PSA (blood test for prostate cancer)
- Serum protein electrophoresis (blood test for myeloma)
- Serum cholesterol test for HDL & LDL
- Stress test on a bicycle or treadmill
- Thermography

With the Medical Bridge Plan, premiums are TAX-FREE and family coverage is available.

Frequently Asked Questions

How are my benefits paid?

Benefits are paid directly to you, unless you specify otherwise. Benefits are paid regardless of any other coverage you may have with other insurance companies.

What if I change employers?

Benefits are portable. If you change jobs or retire, you can take your coverage with you at no increase in premium.

How do I file a claim?

Wellness claims may be filed over the phone. Simply call our Policyholder Service Center at

1.800.325.4368. For all other types of claims, visit coloniallife.com for additional information.

Regular fulltime employees interested in obtaining more information or enrolling in this Voluntary Medical Bridge Plan should call the Employee Services Center at (704) 432-6947.

myTotalHealth



Mecklenburg County is committed to employee health. The myTotalHealth Employee Wellness program is designed to offer programs and services that promote health and well-being. The Wellness Ambassadors in each department can help you get connected to the program offerings.

CAMP WELLNESS

MECHTER COUNTY EMPLOYEE'S All employees are invited to participate in this annual event. Learn about new and innovate ways to stay well at our health fair. We also offer flu shots at no cost to employees and a convenient Mammography Screenings through the mobile van.



*my*Tota

LIFESTYLE MANAGEMENT PROGRAMS

Whether you're looking for help with weight, tobacco or stress management, Cigna's Lifestyle Management Programs are her for you. Each program is easy to use, available where and when you need it, and is always no cost to you. Call 1.866.417.7848 or visit

HEALTH CHALLENGES

myCigna.com

Health Challenges are a great way to keep your health a priority! Our team challenges are both health and activity based. The Team format helps keep you on track. Everyone is a winner when it comes to good health!

ONSITE HEALTH AND WELLNESS **CLASSES**

Learn new ways to stay healthy and well at work and at home with our onsite educational classes. We offer various health and wellness topics in a Lunch and Learn format.



ACCESS TO ONSITE AND PARK AND RECREATION FITNESS CENTERS

County employees have FREE access to all Park and Recreation Fitness Centers. In addition, aquatic centers and out-door pools are offered at a discounted rate. Visit the MeckWeb main page and click on the "myTotalHealth" icon to find a complete list of fitness centers and registration information.

Wellness Contact Information:

mytotalhealth@mecklenburgcountync.gov

Employee Assistance Program



What is the EAP?

Your Employee Assistance Program (EAP) provides you and your household members with free, confidential assistance to help with personal or professional problems that may interfere with work or family responsibilities.

Services are available 24-hours a day, 7-days a week via a toll-free nationwide number. You and your household members can receive up to six (6) face-to-face counseling sessions (which include assessment, follow-up and referral services) per person, per problem episode, per year.

In addition, the program provides access to childcare, eldercare, legal and financial resources and referrals, as well as convenience care services.

Problems Addressed

- Stress Management
- Family Problems
- Child Care/Parenting
- Substance Abuse Issues
- Marital/Relational
- Legal/Financial Concerns
- Grief/Loss
- Work-Related Issues
- Communication
- Time Management
- Health/Wellness Issues

Program Cost

The Program is a free benefit provided and paid for by your employer. If additional help is needed, your health insurance plan may cover a portion of the costs.

Confidentiality

Business Health Services adheres to federal and state privacy laws and holds client information in the strictest of confidence. Information about a client's problem cannot be released without the written permission of that individual.

How Does It Work?

Help is just a phone call away. Simply call Business Health Services' toll-free number: 1.800.327.2251.

A Care Coordinator will confidentially assess the problem, assist with any emergencies and connect you to the appropriate resources. The Care Coordinator then becomes your personal point of contact and will keep in touch to ensure you are satisfied with all services provided.

You can also visit us online at www.bhsonline.com for program information, wellness resources and health tips. Employees accessing the website will need to enter the user name 'MECKCO' to log on.

1.800.327.2251 | www.bhsonline.com



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Holidays and Leave

Holidays (11 Annually—Regular Fulltime Employees)

New Year's Day	Veterans Day	
MLK's Birthday	Thanksgiving Day	
Good Friday	Friday after Thanksgiving	
Memorial Day	Christmas Day	
*Independence Day	One other day @ Christmas	



*12 Month Employees only

Bereavement Leave

Mecklenburg County allows time away from work for the death of an immediate family member. Regular fulltime employees may take up to 24 consecutive work hours paid leave.

Leaves of Absences

There are specific types of absences which may be approved as periods of time away from work. Mecklenburg County recognizes the following types of leave. Restrictions apply.

Administrative Leave — unpaid up to 30 days

Military Caregiver Leave — unpaid up to 26 work weeks

Extended Medical Leave — unpaid up to 52 work weeks

Extended Family Leave — unpaid up to 52 work weeks

Military Leave

Disaster Response Leave

Family/Medical Leave – unpaid up to 12 work weeks

*Paid Family Leave— paid to up 6 weeks

*Full-time benefits eligible employees eligible for family medical leave as defined by FMLA excluding intermittent and employee only.

Sick Leave (12 days annually)

For regular fulltime and part time employees, sick leave is accrued on a bi-weekly basis at a rate of 0.04615 hours (12 days annually) for each regularly scheduled hour worked. There is no maximum accrual limit.

Sick Leave Donation: In long-term medical situations, employees may donate sick leave to other employees subject to certain conditions.



Vacation Leave

For regular fulltime and part time employees, vacation leave begins accruing on the first day of employment. The accrual rate is based upon years of service. Employees who do not use sick leave or leave without pay for 7 consecutive pay periods earn an additional 4 hours of vacation.

Vacation Accrual Rate						
Years of Service	Days per Year					
rears or service	12 Month	10 Month				
0-1	10	8.5				
2-4	12	10.2				
5-9	15	12.7				
10-14	18	15.2				
15-19	21	17.8				
20+	24	20.3				

At the end of each calendar year, employees may carry a maximum of 30 days vacation into the New Year, and any excess leave over 30 days will be rolled into the employee's accumulated sick leave balance.



Key Things

You need to Know

Coverage for Eligible Family Members

County employees may cover eligible family members by paying a bi-weekly payroll deducted premium. Eligible family members include:

- Your legally married spouse
- Your biological, foster, adopted or step-child/ren up to age 26, a disabled dependent child over age 26.

To comply with the Affordable Care Act reporting, we require dependent social security numbers be provided for dependents covered by our insurance plans.

Mecklenburg County participates in an ongoing dependent verification process. Employees covering dependents will be asked to provide verification documentation.

Do you have a Change in your Family and/or Financial Situation?

Family Status Change

It is the employee's responsibility to advise the Employee Services Center within 31 days of a qualifying family status change (birth/adoption, marriage/divorce, graduation of child, death, etc) if a dependent needs to be dropped or added. After the 31 day period, no dependents can be added or dropped. Premium refunds will not be made and coverage will end as soon as the dependent becomes ineligible for coverage. See Forms and Information in this brochure for contacting the Employee Services Center.

What types of changes can I make throughout the year?

- Add or drop dependent coverage, based on a qualifying event (such as marriage, birth of a child or dependent has reached maximum age).
- ◆ Change or update your life insurance beneficiary information
- Enroll or change participation level in the 401K or 457 Defined Contribution Plan.
- Enroll or change participation in the NC529 College Savings Plan.

Need More Information?

Benefit forms and information are available to County employees on the intranet (MeckWeb). Customer Service is available by phone at our Employee Services Center at (704) 432-6947 and by email at myHR@mecklenburgcountync.gov.



2018 Preventive Generics Drug List

Preventive medications are used for the prevention of conditions such as high blood pressure, high cholesterol, diabetes, asthma, osteoporosis, heart attack, stroke and prenatal nutrient deficiency.

Following is a list of generic preventive medications covered at 100%, arranged by type of condition.

If you have any questions please call the toll-free number on the back of your Cigna ID card.

Asthma related

albuterol sulfate

albuterol sulfate (nebulizer

solution)

albuterol sulfate/ipratropium

nebulizer solution

budesonide

caffeine citrate

cromolyn sodium inhalation

solution

ipratropium bromide

levalbuterol HCl

levalbuterol tartrate HFA

metaproterenol sulfate

montelukast

terbutaline sulfate

TheoChron

theophylline anhydrous

zafirlukast

Blood pressure related

acebutolol HCl

acetazolamide

Afeditab CR

amiloride HCl

amiloride/hctz

amlodipine besylate

amlodipine besylate/benazepril

amlodipine/atorvastatin calci-

um

amlodipine/olmesartan

amlodipine/valsartan

amlodipine/valsartan/hctz

atenolol

atenolol/chlorthalidone

benazepril HCl

benazepril HCl/hctz

betaxolol

bisoprolol fumarate

bisoprolol/hctz

bumetanide

candesartan

candesartan/hctz

captopril

captopril/hctz

carvedilol

chlorothiazide

chlorthalidone

clonidine

clonidine HCl

clorpres

diltiazem

diltiazem ER doxazosin mesylate

enalapril maleate

enalapril maleate/hctz

eplerenone

eprosartan mesylate

felodipine ER

fosinopril sodium

fosinopril sodium/hctz

furosemide

guanfacine HCl

hydralazine HCl

hydrochlorothiazide

indapamide

irbesartan

irbesartan/hctz

isradipine

labetalol HCl

lisinopril

lisinopril/hctz

losartan potassium

losartan/hctz

methazolamide

methyclothiazide

methyldopa

methyldopa/hctz

metolazone

metoprolol succinate

metoprolol tartrate

metoprolol/hctz

minoxidil

moexipril HCl

moexipril HCl/hctz

nadolol

nadolol/bendroflumethiazide

nicardipine HCl

nifedipine

nifedipine ER

nimodipine

nisoldipine

olmesartan

olmesartan/amlodipine/hctz

olmesartan/hctz

perindopril erbumine

phenoxybenzamine

pindolol

prazosin HCl

propranolol ER

propranolol HCl

propranolol/hctz

quinapril

quinapril HCI/hctz

ramipril

Sorine

sotalol AF

sotalol HCl spironolactone

spironolactone/hctz

telmisartan

telmisartan/amlodipine

telmisartan/hctz

terazosin HCl

timolol maleate

torsemide trandolapril

trandolapril/verapamil

triamterene/hctz

valsartan valsartan/hctz

Vecamyl - mecamylamine HCl

Verapamil

Blood thinner related

aspirin/dipyridamole ER

cilostazol

clopidogrel bisulfate

dipyridamole Jantoven

Warfarin

Cholesterol related

amlodipine/atorvastatin

atorvastatin

cholestyramine/aspartame

cholestyramine/sucrose

colestipol HCl

ezetimibe

fenofibrate

fenofibric acid fluvastatin ER

gemfibrozil

lovastatin

niacin ER

omega-3 acid ethyl esters

pravastatin

rosuvastatin

simvastatin

Diabetes related

acarbose Bydureon

Byetta

chlorpropamide

Diabetic Supplies (i.e. lancets, syringes, urine tests, alcohol

pads)

Farxiga glimepiride glipizide glipizide ER

glipizide/metformin HCl

glyburide

glyburide micronized

glyburide/metformin Humalog

Humulin

Invokamet

Invokamet XR Invokana

Janumet

Janumet XR Januvia

Kombiglyze XR

Lantus Lantus SoloStar

Levemir

Levemir FlexTouch metformin HCl

miglitol

nateglinide Novolin

Novolog

OneTouch Ultra Test Strips OneTouch Verio Test Strips

Onglyza

pioglitazone HCl

pioglitazone HCl/metformin

pioglitazone/glimepiride

repaglinide repaglinide/metformin

SymlinPen

tolazamide

tolbutamide

Toujeo Tresiba FlexTouch

Trulicity Xigduo XR

Osteoporosis related

alendronate sodium calcitonin-salmon

etidronate disodium

ibandronate sodium raloxifene

risedronate sodium **Prenatal Vitamins**

All prescription strength prenatal vitamins are considered preventive

Please note: this list is subject to change and may not include all preventive medications that your plan covers. You can refer to myCigna.com for a complete and up-to-date drug listing for your plan.

Mecklenburg County Employee Benefits

STATEMENT OF EQUAL EMPLOYMENT OPPORTUNITY AND AMERICANS WITH DISABILITIES ACT

It is the policy of the County to provide equal employment opportunity without regard to race, color, religion, sex, sexual orientation, genetic information, political affiliation, age, disability, national origin, or other status protected by federal, state or local law.

Discrimination against any person in the recruitment, examination, appointment, training, promotion, retention, discipline, or any other aspect of personnel administration because of race, color, religion, sex, sexual orientation, genetic information, political affiliation, age, disability, national origin, or other status protected by federal, state or local law is prohibited.

Discrimination on the basis of age, sex, or physical disability is prohibited except where age, sex, or disability requirements constitute a bona fide occupational qualification necessary for performance of the essential functions of a job.

The County will comply with the Americans with Disabilities Act (ADA) which prohibits discrimination on the basis of a disability. The County will make reasonable accommodations upon requests of otherwise qualified disabled applicants and employees to enable them to perform essential job functions except where such accommodations may constitute an unreasonable hardship or jeopardize the health and safety of employees, applicants or the general public.

The employee benefits program is administered by Mecklenburg County
Human Resources Department
700 East 4th Street
Charlotte, NC 28202

Employees Services Center: (704) 432-6947 phone (704) 336-2731 fax www.charmeck.org

For additional information about any benefits described in this brochure, please consult Mecklenburg County policies, the applicable summary plan description (SPD), or the actual plan. In the event that there is any conflict between the information in this brochure, the SPD, the policies, and/or a plan, the plan document always governs.

Participation in any of the County's benefit plans does not create and should not be viewed as a contract of employment. While Mecklenburg County intends to provide these benefits for an indefinite period of time, it reserves the right to terminate, suspend, withdraw, amend, or modify a plan at any time. Any such change or termination of benefits will be based solely on the decision of the County.

IMPORTANT NOTICES

Rate Notice for 10 Month Employees

In order to provide continuous medical coverage for 10 month staff, the County deducts additional amounts in the 10 months (22 pay periods) worked to cover the approximate 2 months in the summer (4 pay periods) in which staff do not receive a paycheck and are not paying premiums.

ACCESS TO AND AVAILABILITY OF THE NOTICE OF PRIVACY PRACTICES

Mecklenburg County Group Health Plans' Notice of Privacy Practices (NPP) is applicable to persons enrolled in the employee and retiree medical plans, the dental plan, the medical flexible spending plan, and employee assistance program. If you wish to request a paper copy, you must submit your request in writing to the Group Health Plans' Privacy Coordinator at Privacy.Practices@MecklenburgCountyNC.gov or via US Mail to: County HR, Compliance & Privacy Practices, 700 E. Fourth Street, Charlotte, NC 28202.